



E001218

October 24, 1972

TO : Dick Berman

FROM : Dan Zwick

SUBJECT: RMP Paper

ISSUE I

It seems there should be 2 other options:

1. RMP's should increase attention to categorical diseases
2. RMP should be included in revenue sharing but with separate earmark for the designated RMP organization.

You might wish to include another:

3. RMP should be included in revenue sharing but with separate earmark for designated RMP functions.

ISSUE II

I thought Marquardis was for the option of Federal certification of the local review process with moderate Federal program direction.

ISSUE III

I still believe the paper should deal with "core staff" issue - perhaps by emphasizing % of funds to be used for demonstrations and other local activiries.

TAB B

I - Page 6 - Multi-categorical and comprehensive are not the same. - Need breakdown of activities by region, i.e. how many regions doing things in demonstrations, manpower, etc.. by sub-activity.

Page 8 - Column 2 is confusing - it is % of \$35 million, I guess.- it would be good to indicate also % of \$111 million.

Page 9 - What do we know about "incorporation" results?

Page 11- Need information on fund allocation by region, including per capita.

II - Criticism and Response

For the purposes of analysis, the criticisms need to be more fully presented.

1. What relationship to national goals?
Can more data be presented in relation to 3 missions?

2. What about other regions?
3. How much is actually spent?
- 3B. How does manpower bit relate to BHEE reorganization plans?
4. Some of concern is reported high staff salaries.
5. Need data on how many regions are doing so.
6. Why so many "No Comments".
10. Confusion on "comprehensive" again.
11. Criticism that RMP supports largely what would happen anyway - not meaningful or effective changes, individual whims.
Criticism that RMP adds to patient care costs by developing extra and costly resources.

III - Strengths

1. Major HEW "contact" with providers is Medicare, not RMP. Statement requires revision. Is it "provider revenue sharing" or not?
2. Whose "reform"?
3. Note January conference. Why only half?

4. What happens ~~often~~ "decremental" funding?
5. But are they becoming tools of medical society?

IV - Federal Needs

These ideas should be at least introduced much earlier in the paper. They relate closely to discussions of mission and related decision options.

Appendix

1. A simple table summarizing major legislative changes, by year, would be helpful.
3. Need information on fund distribution by region, including per capita.
5. Needs title
8. Wonder what makes New Jersey so good?
Should Bold Missouri.
Ratings might be related to per capita figures.
9. Are there regulations?

Need more specific information on regional variations - for example, % of funds for demonstrations and core staff by region.

GLOBAL ACTIVITIES	GROUNDWATER ACTION PLAN ACTIVITIES PROGRAM			
	1994	1995	1996	1997
MAYO - YAQUI			██████████	
Groundwater model		██████████	██████████	
Optimization model		██████████	██████████	
Suplementary data		██████████	██████████	
Aquifer action plan			██████████	
AGUASCALIENTES		██████████	██████████	
Groundwater model		██████████	██████████	
Optimization model		██████████	██████████	
Suplementary data		██████████	██████████	
Aquifer action plan		██████████	██████████	
MEXICALI			██████████	
Groundwater model			██████████	
Optimization model			██████████	
Suplementary data			██████████	
Aquifer action plan			██████████	
DELICIAS				██████████
Groundwater model			██████████	██████████
Optimization model			██████████	██████████
Suplementary data			██████████	██████████
Aquifer action plan			██████████	██████████